



FERPA Student Release

Office of the Registrar · 79 New Montgomery Street · San Francisco, CA 94105 · Phone 415-618-6454 · Fax 415-618-8237

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of Student Education Records. FERPA gives students who reach the age of 18 or who attend a postsecondary institution the right to inspect and review their own education records. It also prohibits the sharing of information with parties not designated by the student to view education records.

Academy of Art University does not release information from a student's educational record without the student's written consent unless such disclosure is legally permitted under FERPA.

Student Name: _____ **Student ID#:** _____

I authorize Academy of Art University to release information to the following person(s) upon request. I understand this authorization is in effect until I revoke it in writing or submit an updated consent form.

1) Name: _____ Relationship: _____

2) Name: _____ Relationship: _____

3) Name: _____ Relationship: _____

I grant the above named people access over the phone, in person, by mail, or by email to the following records:

- Academic Records/Education Records (not including official transcripts*)
- Admissions Records (information prior to attendance at Academy of Art University)
- Learning Strategies Records/Disabilities Records
- Financial Aid Records
- Student Account/Financial Records
- Student Affairs/Residence Life
- Student Conduct Records

* Official transcripts must be requested only by the student or former student online, in writing or through the National Clearing House.

Student Signature: _____ **Date:** _____

Cancellation of Consent to Release

An updated Consent to Release form will also supersede any previously granted permissions given to Academy of Art University.

I revoke/cancel my permission to release information to the following person(s):

1) Name: _____ Relationship: _____

2) Name: _____ Relationship: _____

3) Name: _____ Relationship: _____

Student Signature: _____ **Date:** _____